

TOWCESTER RURAL DISTRICT.

ANNUAL REPORT

of the

Medical Officer of Health

for the

Year 1944.

D. A. McCracken, M.D.

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SUMMARY OF VITAL STATISTICS, 1944.

Area (acres)	59,005
Population 1931 (census)	Potterspury and Towcester R.Ds.							13,458
„ 1944	...	...	...	...	...	...	...	13,680
Number of separate dwellings occupied 1931 (census)								
	Potterspury and Towcester R.Ds.							3,771
„ „ „ „ occupied 1944	...	...	...	...	...	...	...	4,358
Rateable value 1944	...	...	...	...	...	...	...	£53,399
Product of a penny rate 1944	...	...	...	...	...	...	...	£219

Live Births.

					<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate</i>
Legitimate	...	...	...	...	228	107	121	
Illegitimate	...	...	...	...	14	9	5	
					<hr/>			17.67
					242	116	126	

Stillbirths.

					<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate</i>
Legitimate	...	...	...	...	7	3	4	
Illegitimate	...	...	...	...	1	1	—	
					<hr/>			0.57
					8	4	4	

					<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate</i>
Deaths (all causes)	...	...	...	...	192	96	96	14.04

Deaths from Puerperal Causes.

Puerperal and post-abortive sepsis	...	...	...	...	...	...	...	<i>Nil.</i>
Other puerperal causes...	...	...	...	...	...	...	...	1

Infant Mortality—rate per 1,000 live births.

Legitimate	...	...	...	...	...	...	...	30.70
Illegitimate	...	...	...	...	...	...	...	71.42
Total	...	...	...	...	...	...	...	33.01

Deaths from Cancer (all ages)	...	...	...	...	...	...	...	25
„ „ Measles (all ages)	...	...	...	...	...	...	...	<i>Nil.</i>
„ „ Whooping Cough	...	...	...	...	...	...	...	<i>Nil.</i>
„ „ Diarrhoea (under 2 years)	...	...	...	...	...	...	...	<i>Nil.</i>

Towcester Rural District Council.

Members of the Public Health and Housing Committee :

Messrs. S. NORTH (Chairman), J. H. BROWN, REV. H. C. CARPENTER,
J. A. GARLICK, W. T. GROOM, T. F. KINGSTON, J. V. LIDDINGTON,
C.C., W. H. MARLOW, J. T. PINKARD, R. L. C. RIDGEWAY.

*The Chairman and Vice-Chairman of the Council are ex-officio members
of the Committee.*

Public Health Officers of the Local Authority :

Medical Officer of Health,

DAVID ANDREW MCCrackEN, M.D., Ch.B., D.P.H.

also holds appointments of

Deputy County Medical Officer of Health.

Deputy School Medical Officer.

Medical Officer of Health, Borough of Higham Ferrers.

Medical Officer of Health, Rushden Urban District Council.

Medical Officer of Health, Irthlingborough Urban District Council.

Medical Officer, Kettering Venereal Diseases Treatment Centre.

Chief Sanitary Inspector and Surveyor :

TOM HARRIS, C.R.S.I., M.S.I.A. (who holds the Royal Sanitary
Institute's Certificate for Meat Inspection).

Assistant Sanitary Inspector and Surveyor :

D. J. POWELL, B.Sc., Cert.S I.B., A.R.S.I.

TOWCESTER,

October, 1945

To the Chairman and Councillors of the Rural District of Towcester.

MR. CHAIRMAN, MRS. HAWLEY AND GENTLEMEN,

I have the honour to present the Annual Report of the Medical Officer of Health on the health and sanitary circumstances of the district for the year ended 31st December, 1944.

The vital statistics are satisfactory. The death rate shows no significant change as compared with 1943. The birth rate whilst below the national rate compares favourably with that for the Administrative County. The infant mortality rate of 30.01 per thousand live births is low as compared with the rate of 46.00 for England and Wales.

The provision of a comprehensive water scheme and sewage disposal works is an essential pre-requisite to the post-war housing programme. The housing proposals are very satisfactory so far as new dwellings are concerned but there are a number of slum dwellings in the district which require clearance.

The incidence of zymotic diseases gave no cause for anxiety. The diphtheria immunisation statistics are very gratifying. Much credit is due to the County Council's Health Visitor for the local propaganda which she carries out in the course of her duties, and also to the school teachers in the various parishes for their support.

I acknowledge with gratitude the continued support I receive from the Public Health Committee and the Council, and the assistance and advice afforded me by the Executive Officers of the Council.

I have the honour to be,

Your obedient servant,

D. A. McCRACKEN,

Medical Officer of Health.

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

Area. The area of the district is 59,005 acres. The density of the local authority area is 4.3 persons per acre and the housing factor is 3.12 persons per inhabited house.

Population—The Registrar-General estimated the resident population for 1944 to have been 13,680 persons. During the war years the resident population increased as a result of the influx of evacuees and transferred war workers. The pre-war population of 12,860 in 1938 rose to 14,750 in 1941 and thereafter steadily diminished to 13,680 in 1944. In 1944 there were fifty more births than deaths recorded.

Deaths—The total number of deaths assigned to the district by the Registrar-General after adjustment for inward and outward transfers was 192 as compared with 193 in 1943. The recorded death rate was equivalent to 14.04 per thousand of civilian population as compared with 11.60 for England and Wales. The following table shows the death rates for the quinquennium 1940-44 together with corresponding rates for England and Wales and the Administrative County so far as they are available. The 'comparability' factors for the standardisation of the death rates for 1941-44 are not available owing to the magnitude and variety of local population movements and the uneven distribution of civilian war deaths.

Death Rates 1940-44.

<i>Towcester R.D.</i>					<i>Standardised Death Rate</i>		
<i>Year</i>	<i>Total</i>	<i>Male</i>	<i>Fe- male</i>	<i>Recorded Rate</i>	<i>Towcester R.D.</i>	<i>Administra- tive County</i>	<i>England & Wales</i>
1940	219	110	109	16.55	13.40	11.30	14.30
1941	211	109	102	14.31	*	11.94‡	12.90
1942	147	76	71	10.47	*	11.02‡	11.60
1943	193	97	96	14.23	*	12.29‡	12.10
1944	192	96	96	14.04	*	12.60	11.60

* *Not available.*

‡ *Recorded rate.*

A list of the causes of death classified according to the International List of Causes of Death (1938) is given in Table No. 1, page 24, whilst the history of the rate for 1919-44 is shown in Table No. 3, page 26.

Birth Rate—The number of live births assigned to the district was 242 as compared with 254 in 1943, thus giving an increase of 3.9 per cent. The number of births was equivalent to 17.67 per thousand of population. The following table shows the trend of the birth rate for 1940-44, together with other figures for comparison.

Birth Rates 1940-44.

		1940	1941	1942	1943	1944
Towcester R.D.	...	13.90	13.80	17.40	18.55	17.67
Administrative County		13.94	13.51	16.66	17.91	20.07
England and Wales	...	14.60	14.20	15.80	16.50	17.60

Maternal Mortality—It is gratifying to report that no deaths were assigned to puerperal causes or other conditions associated with childbirth.

Stillbirth Rate—The number of stillbirths registered was eight as compared with six in 1943. This number is equivalent to 0.57 per thousand of population as compared with 0.5 for England and Wales.

Illegitimate Birth Rate—Fourteen illegitimate live births were registered as compared with twenty-three during the previous year. This gives a rate of 57.8 per thousand live births and contrasts with the rate of 90.5 for 1943.

Infant Mortality—Eight infants (7 legitimate, 1 illegitimate), who died under one year, were assigned by the Registrar-General to the district, thus giving a total infant mortality rate of 33.01. The rates for the quinquennium, 1940-44, together with comparisons are :

Deaths under one year per 1,000 live Births.

		1940	1941	1942	1943	1944
Towcester R.D.		36.95(7)	68.96(14)	49.18(12)	55.11(14)*	30.01(8)
Administrative						
County	...	40.30	48.10	34.50	40.38	38.00
England and						
Wales	...	55.00	59.00	40.00	49.00	46.00

* Three less recorded locally.

Neonatal Mortality—Infants who die within twenty-eight days of independent existence are classified as neonatal deaths and as such are included in the total infant mortality rate. The neonatal death rate per 1,000 live births together with the nett number of deaths for 1940-44 was :

1940	1941	1942	1943	1944
27.71(5)	24.63(5)	24.54(6)	31.46(8)	24.79(6)

As will be noted from Table No. 2, page 25, the majority of the deaths occurred in infants within the first week of life.

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES.

Laboratory facilities—There is no change in the arrangements described in the annual report for 1939-42.

Diphtheria Antitoxin—A supply of antitoxin continues to be maintained at the Town Hall in accordance with the provisions of the Diphtheria (outside London) Order, 1910, and is available free of charge to medical practitioners for use in the district.

Ambulance facilities—Non-infectious and accident cases are removed by the St. John Ambulance Brigade ambulance stationed at Towcester. The service is efficient and meets the needs of the district. Cases of infectious disease are removed by the ambulance maintained by the Western Northamptonshire Joint Isolation Hospital Board.

Nursing in the Home—The following list gives details of the work which has been carried out by the nursing associations in the district, who make the services of their district nurse-midwives available for nursing in the home.

<i>Association.</i>	<i>Cases Nursed.</i>			<i>Total</i>
	<i>General</i>	<i>Midwifery</i>	<i>Maternity</i>	
1. Blakesley and District ...	43	11	9	1894
2. Gayton	136	30	13	3911
3. Potterspury, Stoke Bruerne and District ...	44	22	20	2718
4. Towcester	28	23	6	1157
5. Whittlebury	7	11	17	1559
6. Wicken	102	8	18	3457
TOTAL	360	105	83	14,696

Hospitals—There are no hospitals in the district.

Hospital Accommodation for Infectious Diseases—The local authority is one of the constituent authorities of the Western Northamptonshire Joint Isolation Hospital Board. The hospital is situated at Staverton near Daventry. The precept levied on the Council by the Board for 1944 was £602.

Nurseries—A nursery for the reception of evacuee children under five years of age is situated at Duncote Hall, near Towcester. The nursery is administered by the Health Department of the County Council. The accommodation is reserved for children who have been evacuated from former danger areas.

Treatment Centres and Clinics—Child Welfare Clinics provided by the County Council, are held once each month at Potterspury and Towcester. Diphtheria immunisation is carried out at these clinics. An ante-natal clinic is also held once monthly at Towcester.

SECTION C.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

Water Supply—With the exception of a few villages the water supply throughout the district was very precarious for the greater part of the year. The district is in need of a comprehensive water scheme which will provide a piped water supply to every village, hamlet, school and home in the area. Such a provision is envisaged in the scheme which has been submitted to the Ministry of Health and the County Council at the time of writing this report. Protracted negotiations have taken place with the Bucks Water Board and other interested local authorities to obtain a bulk supply of water. It is most essential that an adequate supply of potable water be obtained at an early date if the community are to derive the fullest benefit from the Council's peace-time housing programme. The time for negotiation (often unavoidable) is now past, and I urge that every effort be made to bring to fruition the scheme for obtaining a bulk supply of water which can be piped into every household and farm building in the district.

Sewage Disposal, Drainage and Sewerage—No work of importance has been undertaken. The schemes which had been held in abeyance owing to war-time conditions have been resuscitated and I now urge that they be pursued with all expediency.

Disinfection—The disinfection of bedding and clothing is carried out by means of a portable "Thresh" disinfectant. Concurrent and terminal disinfection is carried out by means of gaseous and liquid disinfectants in homes where infectious disease is notified. Details of the work carried out is given in Table No. 4, page 27.

Eradication of Bed Bugs—No action was found necessary.

Movable Dwellings—No licences were granted by the Council under the Public Health Act, 1936, Section 269. Twenty-five caravans were inspected in the district.

Rats and Mice (Destruction) Act, 1919. Infestation Order, 1943—Advice and assistance have been given by the Sanitary Inspectors in appropriate cases. No major infestations came to notice.

Public Cleansing—The scheme for the collection of refuse is as follows :

1st Monday	Deanshanger, Passenham, Old Stratford.
2nd Monday	Deanshanger, Passenham, Old Stratford, Wicken.
3rd Monday	Deanshanger, Passenham, Old Stratford, Cold Higham.
4th Monday	Deanshanger, Passenham, Old Stratford, Gayton, Tiffield.
1st Tuesday	Potterspury, Paulerspury (alternate weeks).
2nd Tuesday	Cosgrove, Yardley Gobion, Grafton Regis, Alderton.
3rd Tuesday	Potterspury (alternate), Stoke Bruerne, Shutlanger.
4th Tuesday	Cosgrove, Yardley Gobion, Whittlebury.
1st Wednesday	Pattishall.
2nd Wednesday	Bradden, Slapton, Silverstone.
3rd Wednesday	Litchborough, Maidford, Adstone, Blakesley, Woodend.
4th Wednesday	Abthorpe, Wappenham, Weston and Weedon.
1st Thursday	Towcester, Easton Neston.
2nd Thursday	Towcester.
3rd Thursday	Towcester.
4th Thursday	Towcester, Caldecote, Wood Burcote.
Friday	Greens Norton (alternate weeks).

The refuse is collected with a reconditioned Morris open lorry. At the end of the year consideration was being given to the purchase of a specially constructed refuse collection motor vehicle.

Further details of the work carried out by the Sanitary Inspectors is given in Table No. 4, page 27.

SECTION D.

HOUSING.

There is an urgent need for the provision of a large number of new houses throughout the district to replace unfit property and to make provision for the general needs of the community.

Many of the condemned properties, which are dilapidated, are definitely hurtful to the physical, moral, and mental well-being of the occupants and they are quite unfit surroundings in which to nurture children. In order to relieve to some degree the acuteness of the housing shortage, the Council have allowed owners to let condemned cottages temporarily under the terms of the Defence (General) Regulations, 1939, 68A and 68AA. A total of eighty-four houses have been licensed on condition that they are maintained to the satisfaction of the Medical Officer of Health and the Chief Sanitary Inspector and that the rent charged should not exceed three shillings per week exclusive of rates. Whilst the licensing of these houses is most undesirable they make a small contribution to the pressing housing needs of the district. Details of the individual villages and the number of houses licensed as at 31st December, 1944, were as follows :

<i>Village.</i>	<i>Number.</i>
Cosgrove	17
Deanshanger	5
Greens Norton	22
Gayton	7
Grafton Regis	1
Potterspury	5
Pattishall	2
Silverstone	9
Towcester	13
Wicken	3
TOTAL	<hr/> 84 <hr/>

The year 1944 was one of intense preparatory work in planning a long term programme to meet the housing needs of the district. It is quite probable that the ultimate demand for new houses within the next decade will not fall far short of a thousand houses. The immediate post-war programme totals 356 permanent houses and the following table shows the provisional allocation to the various parishes :

<i>Parish.</i>	<i>First Year's Programme.</i>	<i>Second Year's Programme.</i>	<i>Total.</i>
Abthorpe	4	2	6
Blakesley	4	—	4
Blisworth	—	8	8
Cold Higham	—	4	4
Cosgrove	4	2	6
Gayton	4	8	12
Grafton Regis	—	8	8
Greens Norton	6	22	28
Litchborough	—	4	4
Maidford	2	6	8
Passenham	6	44	50
Pattishall	—	14	14
Paulerspury	4	10	14
Potterspury	10	12	22
Shutlanger	—	2	2
Silverstone	10	30	40
Stoke Bruerne	2	6	8
Towcester	28	10	38
Wappenham	—	8	8
Weston and Weedon	—	8	8
Whittlebury	4	4	8
Wicken	4	2	6
Yardley Gobion	8	42	50
TOTALS ...	100	256	356

The selection of the particular parishes for the first year's programme was determined on the availability of a water supply. In selecting sites care has been taken to select land which will be suitable for further housing development. In order to expedite the building of the initial instalment of houses, arrangements were made at the request of the Government to prepare sites ready for building operations as soon as circumstances would permit. With this object in view and to make the best use of the labour available, the Council, after much negotiation and delay, became a member of the Bletchley group of local authorities for this purpose.

Following the issue of the "Hobhouse Report" on Rural Housing, a Joint County Committee consisting of representatives of the County Council and the eight Rural District Councils was formed. Mr. W. A. Thornton, Chairman of the Daventry Rural District Council, was appointed Chairman of the Committee; the Lord Henley, Chairman of the County Council, as Deputy Chairman and Mr. J. Alan Turner, O.B.E., Clerk of the County Council, the Honorary Secretary.

A Technical Sub-Committee under the Chairmanship of Mr. Clifford E. Jones, Clerk to the Northampton Rural District Council, was formed, and two further sub-committees were appointed by this Technical Sub-Committee, viz., Standards and Records Sub-Committee and the New Houses Sub-Committee. The former is under the Chairmanship of Dr. C. M. Smith, County Medical Officer of Health, and the latter under the Chairmanship of Sir John Brown, K.C.B., F.R.I.B.A., Architect to this Council.

The Standards and Records Sub-Committee have presented a report on a "Northampton County Rural Standard" for existing houses which has been adopted by this Council and the Joint Committee as a prescribed standard to which all houses in the County should be raised within a period of ten years after the end of the war in Europe. The following is a copy of the report :

NORTHAMPTONSHIRE
JOINT COUNTY COMMITTEE ON RURAL HOUSING.

REPORT OF THE STANDARDS AND RECORDS SUB-COMMITTEE.

At their first meeting your Sub-Committee had submitted to them a memorandum which had been prepared by representatives of the medical officers and sanitary inspectors, the basis of the memorandum being that a standard should be specified to which all houses in the County should be raised within a period which, it was suggested, might be ten years. Your Sub-Committee were in agreement with this principle and have given detailed consideration to the standard, which they propose should be entitled "The Northampton County Rural Standard." They suggest that, in order to satisfy this standard, all houses should comply with the following requirements :

- (1) Situated on a site to which air and light have free access.
- (2) Of sound structural repair in respect of walls, roof, floor and fittings.
- (3) Well-paved paths to front and back of house.
- (4) Free from dampness.
- (5) Adequate and through ventilation.
- (6) Adequate natural lighting.
- (7) Efficient drainage.
- (8) Separate water closet or satisfactory earth closet.
- (9) Satisfactory cooking facilities.
- (10) Satisfactory clothes washing facilities.
- (11) Food store, well ventilated and of adequate size.
- (12) Satisfactory sink.
- (13) Fixed bath
- (14) Handrails to stairs.
- (15) Water supply laid on.
- (16) Good internal arrangement, in particular, each bedroom having separate means of access.
- (17) Adequate outbuildings (a) for fuel, (b) for other storage.
- (18) Secondary means of access.
- (19) Domestic hot water installation.
- (20) Adequate artificial lighting.
- (21) Refuse disposal.
- (22) Decorative repair.

Set out in Appendix I. to this Report are extracts from the memorandum which was submitted to your Sub-Committee, amended in accordance with their suggestions, giving details of the considerations attaching to the adoption of the Northampton County Rural Standard, while in the second Appendix to the Report are more comprehensive details thereof.

R.1. Your Sub-Committee recommend :

That the Northampton County Rural Standard, as referred to above and set out in Appendix II. to this Report, be adopted by the Joint County Committee as a prescribed standard to which all houses in the County should be raised within a period of ten years from the end of the war in Europe.

Staffing. Your Sub-Committee have considered the question of staffing which was referred to them in the light of the memorandum prepared by the representatives of the medical officers and sanitary inspectors.

The Hobhouse Committee made the following references to staffing needs. "We consider that an efficient and zealous staff with proper qualifications and sufficiently numerous to carry out the work is an essential pre-requisite to good housing and that each council should review its arrangements to this end before commencing the long-term programme."

A suggested standard is that for every 2,500 to 3,000 houses included in the survey, if this is to be completed within one year from the end of the war in Europe, there should be one whole-time qualified technical officer ; if, as is expected, such officers cannot be found, the most suitable persons available should be recruited. All staff engaged on surveys in connection with housing will work under the general direction of the District Medical Officer of Health.

Your Sub-Committee discussed the type of persons who might be recruited to assist in the work of the survey, the view being expressed that some builders' managers or builders' costing clerks might be suitable if they were available. The opinion was also expressed that a useful purpose might be served if the competent authorities arranged for a short course of instruction for persons willing to accept employment on the survey.

Adequate clerical assistance is necessary for the keeping of proper records, which are essential to the carrying out of the survey, and the opinion has been expressed that one whole-time clerk should be appointed for every two officers engaged upon the survey, with a minimum of one clerk in each district.

Your Sub-Committee feel that the need for clerical assistance in relation to the survey might be met from existing staffs of district councils engaged on work arising from the war, such as fuel control or food rationing.

Records. Records required in relation to housing surveys fall into two groups, (a) those required for the survey and (b) those needed for the long-term programme. As regards records required for the survey, it is suggested that it would be advantageous if uniform survey record sheets were used by all the rural districts in the County because this would assist to some degree in maintaining uniformity of standards. Consideration has been given to the question as to whether details of overcrowding should be included in the preliminary survey, and the conclusion has been reached that since Northamptonshire is a reception area any information on overcrowding collected at the present time would be of little or no value as a guide to housing authorities upon the needs of the post-war period. Your Sub-Committee have settled a specimen survey sheet, a copy of which is attached as Appendix III. to this Report.

It is proposed that the County Council should invite quotations for the bulk printing of the record and arrange either for its bulk purchase by the County Council and re-sale to the district council or for the District Councils to be afforded facilities for ordering under the most favourable quotation received.

In respect of the records for the long-term programme, there will be required (i) working sheets and (ii) office records. Your Sub-Committee are again of the opinion that uniform records should be employed by the District Councils throughout the County, but this is a subject which will be considered at a later stage.

Labour on Repairs. As regards the reference to the Joint Committee of paragraph 8 of the Ministry of Health circular 64/44 as to the present condition of rural housing within the County and the taking of action as soon as it is in order to secure the fullest possible use of all available labour on repairs, your Sub-Committee are of opinion that, owing to the diversion of all available building labour to areas damaged by enemy action, no suggestions can usefully be put forward at this stage.

It has, however, been agreed that if in any particular case of urgency, difficulties be experienced in obtaining certificates of essentiality, details should be forwarded to the Honorary Secretary so that consideration may be given to the possibility of taking some action.

15/12/44. C. M. SMITH,
Chairman.

APPENDIX I. TO REPORT OF STANDARDS AND RECORDS SUB-COMMITTEE.

EXTRACTS FROM THE MEMORANDUM SUBMITTED TO THE SUB-COMMITTEE.

If the standard suggested or any other "best" standard is adopted by the Joint Committee, we have next to consider how it can be reached, bearing in mind that we must proceed under existing statutory powers, that is, by orders under the Housing Acts, by which houses are repaired, reconditioned, closed or demolished. We must at this stage turn to the statutory definition of fitness for human habitation which is contained in Section 188(4), *viz.*, "In determining for purposes of this Act whether a house is fit for human habitation, regard shall be had to the extent, if any, to which by reason of disrepair or sanitary defects the house falls short of the provisions of any bye-laws in operation in the district or of any enactment in

any local Act in operation in the district dealing with the construction of new streets or of the general standard of housing accommodation for working classes in the district." Sanitary defects as defined in Section 188(1) include "lack of air space or ventilation, darkness, dampness, absence of adequate and readily accessible water supply or sanitary accommodation or of other conveniences, and inadequate paving or drainage of courtyards or passages."

In Northamptonshire no rural district council has made bye-laws under Section 6 of the Housing Act, 1936, and accordingly the standard of fitness is the extent to which by reason of disrepair or sanitary defects the house falls short of the general standard of housing accommodation for the working classes in the district. The general standard then is the yard stick, and action can be taken in respect of houses which are below the general standard beginning with the worst. In this way, and also as the result of the erection of new houses, and of reconditioning under the Housing Act, 1936, and the Housing (Rural Workers) Acts, 1926-38, the general standard throughout each district will be raised, the speed being dependent on the degree of activity of the rural council in housing affairs.

Commenting on the statutory powers of housing authorities the Hobhouse Committee stated as follows (paragraph 55) :

"In fact, however, the scope of the Statutes in their present form is very wide, and apart from certain changes in national policy which restricted action, the more progressive housing authorities have been seldom prevented by lack of powers from carrying out their objectives."

The difficulty must be faced that the proposed Northampton County Rural Standard includes certain features, such as, (a) fixed bath, (b) water laid on, (c) adequate outbuildings, (d) adequate artificial lighting, (e) secondary means of access, (f) domestic hot water installation, all of which are at present possessed by only a few of the existing working class houses in the rural districts. To take an example, if a rural council called on an owner to provide a fixed bath as part of the reconditioning scheme under Section 11 of the Housing Act, 1936, the council would in the years immediately after the end of the war possibly lose the case if an appeal were made to the County Court because most houses do not at present have fixed baths. At the end of a period which, as already suggested, might be ten years, it is hoped that most working class accommodation will include fixed baths and then rural councils would, in our opinion, be able to insist on this provision. Similar considerations apply to the other requirements already referred to in this paragraph. They all make a house not only more convenient but a healthier house to live in, and none of them can be regarded as luxuries. They might well be termed sanitary conveniences. The question whether a dwelling-house is unfit for human habitation or not "is a question of fact to be determined by the local authority in a judicial spirit. The standard to be applied is that of the ordinary reasonable man." All the new houses to be constructed after the war will, without doubt, comply with the proposed Northampton County Rural Standard. Will any reasonable man contend that the existing houses that are to survive after the lapse of, say, ten years from the end of the war, should not have all the requirements we propose?

Before dealing with arrangements for the survey, uniform standards for demolition, reconditioning and repairs must be considered. The only practicable method of securing uniformity, in our opinion, is by affording opportunities to medical officers and sanitary inspectors of seeing the standards in current practice in other districts in the County. In this connection, the County Sanitary Officer, if appointed by the County Council, will be able to perform a valuable function because from his knowledge of rural housing conditions throughout the County, he will be able to give an opinion which will assist in the formation of more uniform standards.

Arrangements for the survey. The appendix to circular 64/44 sets out the categories into which all houses included in the survey should be included.

Although we have described our proposed Northampton County Rural Standard to be attained in ten years, houses to be included in the survey must be classified in accordance with the standard of fitness in current practice, that is, the acid test is whether at the time the houses do or do not, by reason of disrepair or sanitary defects, fall below the general standard of housing accommodation in the district. To give an example: at the time of inspection a house may be found free from defects but lacking a domestic hot water installation. As explained in the paragraph above, such a house could not be regarded as unfit in this respect, until the time is reached when the general standard includes the provision of a domestic hot water installation.

In making the classification we advise that the following amplifying notes be taken as a guide.

All houses owned by local authorities should be included in the survey, and many of them will in time require improvements to bring them up to the proposed Northampton County Rural Standard.

<i>Category and Condition of Dwelling.</i>	<i>Action to be taken and Notes.</i>
1. Satisfactory in all respects.	No action necessary.
2. Minor defects.	Informal action or Public Health Act.
3. Requiring repair, structural alteration or improvement—not eligible for assistance under the Housing (Rural Workers) Acts.	Unfit for habitation but capable of being made fit at reasonable expense.* Action under Section 9. Acquisition by local authority in appropriate cases.
4. Same as 3, but eligible for assistance under the Housing (Rural Workers) Acts.	Action under Housing (Rural Workers) Acts or Section 9. Acquisition by local authority in appropriate cases.
5. Unfit for human habitation and beyond repair at reasonable expense.	Unfit and not capable of being made fit at reasonable expense. Action under Section 11 or Section 25 (Clearance Areas).

* *Reasonable expense should, we suggest as an approximate guide, be regarded as not exceeding two-thirds of the value of the house after reconditioning.*

APPENDIX II. TO REPORT OF STANDARDS AND RECORDS SUB-COMMITTEE.

NORTHAMPTON COUNTY RURAL STANDARD.

(1) **Air space around Buildings.** This should generally comply with the Ministry of Health model building bye-laws under the Public Health Act, 1936, relating to "Space about Buildings."

(2) **Structural soundness.**

Walls. There should be no doubt as to the stability of the walls and if shrinkage or sinking is evident, satisfactory treatment should be possible. Particular attention should be paid to timber, wattle or mud walls. While such walls need not necessarily be condemned because of their structure, the question often arises whether the expenditure of full reconstruction is justified. There should be no rising or surface penetration of dampness, and, if so, remedies should be possible.

Roof. Weather tightness is of course essential and the roof timbers should be sound.

Floors. Should be sound, well ventilated where necessary. Free from dampness. Brick floors should not be regarded as satisfactory.

Fittings. Windows, window frames, doors and all joinery should be firm and sound. Window and door furniture in good condition.

(3) **Paving.** The approaches to house doors, closets, outbuildings, etc., should be impervious paving (not brick) laid to proper falls and not less than 3'6" in width.

(4) **Absence of excessive dampness.** Excessive dampness either rising or penetrating unless satisfactorily remediable should call for condemnation. Wherever possible, rising dampness should be remedied by insertion of a permanent damp course.

(5) **Ventilation.** Through or cross ventilation should be obtainable and each habitable room should have means of permanent ventilation by way or means of fireplace, flue or ventilators.

(6) **Natural Lighting.** Each habitable room and offices should be provided with a window extending as near as possible to the top of the room. The size of the windows should be up to bye-law standard of one-tenth of floor space with half made to open.

Ceiling Height. Where extensive reconstruction is called for, bye-law height of 8 feet should be required. In properties where floor and roofs are not to be raised, and the lighting and ventilation is or will be made adequate, a height of 7 feet could be allowed, measured in accordance with the model bye-laws relating to room height.

(7) **Drainage.** There should be drainage for sink and other waste. Pipes should be of sound construction and water-tight, passed by a water or other test. Drains if not connected to a main drainage system should discharge into a properly constructed cesspool or filter.

(8) **Closet accommodation.** This should be separate to each house and conform with the model bye-laws.

(9) **Cooking arrangements.** If by solid fuel, the stove, etc., should be in sound condition of repair, efficient for its purpose and sufficient in size. If not by solid fuel, facilities for gas or electricity service should be provided where available.

(10) **Clothes Washing arrangements.** This should be separate from the living part of the house and a copper and, if practicable, separate sink with water laid over should be provided.

(11) **Food storage.** This should be not less than 15 sq. ft. in floor area. Well lit and ventilated from the external air with impervious walls and ceiling and, if possible, situated on the northern or eastern aspect. The window should be of not less than 2 sq. ft. in area of which half should open and be fitted with fly screen. Adequate shelving should be provided.

(12) **Kitchen sink.** A standard sized sink of 10 inches in depth should be provided with properly connected waste and, if piped water supply is available, with water laid over.

(13) **Bath.** A fixed bath of recognised size should be provided, preferably fitted in a separate bathroom. Piped water supply, if available, should be laid on.

(14) **Handrails.** All staircases should be provided with strongly fixed handrails.

(15) **Water Supply.** Piped water supply, if available, should be laid on to the house and piped to the sinks, bath, copper and to other essential fittings. If the water supply is from a well, this should be proofed against surface contamination, covered and fitted with a pump. Adequate and covered storage for rain water of not less than 100 gallons capacity should be provided.

(16) **Internal design.** This must be satisfactory and in particular each bedroom must have a separate means of access.

(17) **Outbuildings.** Storage accommodation should be provided for (a) fuel of at least 40 square feet floor area, and (b) for other purposes of at least 70 square feet.

(18) **Secondary approach and secondary means of entry.** Each dwelling should be provided with a secondary approach and secondary entry.

(19) **Domestic hot water supply.** This should ultimately be provided in every house where piped water is available.

(20) **Artificial lighting.** Electricity or gas should, where practicable, be available for efficient lighting in each habitable room, staircase, landing and offices.

(21) **Refuse disposal.** Where there is regular collection of household refuse a recognised standard of dustbin should be provided. Where a regular collection is impracticable a properly sited and constructed ashpit should be required.

(22) **Decorative repair.** This should include plaster, joinery, fittings, etc., and where conditions are dirty, at least stripping, cleansing and colour-washing.

(23) **Cupboards.** Cupboard accommodation in accordance with accepted standards should be provided.

(24) **Ceilings.** All habitable rooms and soffit of stairs shall be properly ceiled.

(25) **Material required for reconstruction and also design.** The requirements of the Town and Country Planning Acts must be complied with.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

Milk and Dairies Order, 1926—The number of cowsheds on the register as at 31st December was 212, and the following inspections were carried out by the Sanitary Inspectors :

Cowsheds	...	...	...	...	...	...	131
Cowsheds, defects found and remedied	...	...	...	...	...	...	12
Cowsheds, reconstructed or reconditioned	...	...	...	...	...	...	5
Milk samples taken	...	...	...	...	...	...	68
Total							216

Milk Supply—Samples of Milk taken during the course of delivery to the consumers have been submitted at regular intervals to the County Laboratory for examination as to cleanliness and keeping quality. The samples are submitted to a standardised methylene blue test to determine if the milk will be sufficiently fresh to be drinkable for some 24 hours after delivery to the consumer. The number of samples so submitted and the classification of the results were :

<i>Classification.</i>					<i>No.</i>	<i>Per cent.</i>
Good	...	...	...	...	47	69
Moderate	...	...	...	...	14	21
Bad	...	...	...	...	7	10
Total					68	—

The results of the tests showed that 69% of samples conformed to the prescribed test for accredited milk and in general the results showed an improvement on the reports for 1943 when only 52% of samples were classified as good. The classification of the results is arbitrary and based on a County standard, since there are no prescribed tests for the bacteriological cleanliness and keeping quality of non-designated milk. Further details of the results of the tests are given in Table No. 6, page 29.

Food Premises—The following visits of inspection were made by the Sanitary Inspectors :

Meat hawkers' vans ...	...	...	...	...	...	12
Fish hawkers' vans ...	...	...	...	...	...	5
Fried fish hawkers' vans	...	...	...	...	...	5
Fruit hawkers' vans	...	...	...	...	...	4
Provision vans	...	...	...	...	...	9
Bakehouses ...	...	...	...	...	...	6
Total						25

Meat Inspection, etc.—The number of premises where slaughtering was carried out was as follows :

Slaughterhouses licenced	...	...	...	...	...	4
Slaughterhouses registered	...	...	...	...	...	23
Total						27

The following visits were paid to slaughterhouses and butchers' shops for the purposes of the Rural District Councils (Slaughterhouses) Order, 1924.

Slaughterhouses	...	...	...	...	...	152
Butchers' shops	...	...	...	...	...	61
Total						213

Details of the quantities of meat and other foods surrendered and destroyed are given in Table No. 7, page 29.

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Small-pox—No cases were notified.

Scarlet Fever—Twenty-seven cases were notified during the year as compared with twenty-five in 1943. The cases were distributed in twelve parishes. The parishes with the highest incidence were Greens Norton and Potterspury with five cases each. The cases were of mild clinical type and no deaths occurred.

Diphtheria—No cases were notified.

Diphtheria Prophylaxis—This highly important branch of preventive medicine proceeded smoothly in accordance with the arrangements described in the Annual Reports of 1939-42. The work continues to be carried out by the County Council as the School and Maternity and Child Welfare Authority whilst in addition a number of children are immunised by private arrangement between the local medical practitioners and parents. The value of diphtheria immunisation throughout the country as a whole is shown by the following extract from the Summary Report of the Ministry of Health for the year ended 31st March, 1944. “ In the two years, 1942-3, the annual rate of incidence of diphtheria amongst immunised children, based on the estimated time of exposure to risk, was rather more than a quarter of that amongst the non-immunised, whilst the mortality ratio was about one to twenty-three. It is estimated that approximately five out of six of the children notified as suffering from diphtheria during the same period and about twenty-nine out of thirty of those who died from it, were children who had not been given the protection of immunisation.” All children should be immunised against diphtheria and educational measures should be directed to inform the parents of children of the advantages of immunisation in childhood. The infants born of mothers who have an immunity against diphtheria are relatively immune for the early months of life. This immunity to diphtheria diminishes rapidly so that by the age of six months few infants have any immunity against the disease. Subsequently children develop immunity approximately in proportion to the frequency of their contacts with persons who harbour the causal organism with or without exposure to persons who have clinically recognisable attacks of disease. The production of immunity in this manner, which is the biological method, is rather a hit or miss phenomenon and too uncertain in its effects, since

there is no control as regards dosage of organisms and frequency of infection. The only known and proved method of protecting children against the ravages of diphtheria is by active immunisation which consists of two small injections of Alum Precipitated Toxoid given at an interval of some four weeks. Immunity is not fully developed for about three months. Children who have been immunised in infancy should be further protected by receiving a single reinforcing dose of prophylactic material on entrance to school.

It is estimated that 62% of children under five years and 82% of those between five and fifteen years in the district were considered immunised as at 31st December, 1944. These figures take no account of children immunised by private arrangement.

Puerperal Pyrexia—No cases were notified under the Puerperal Pyrexia Regulations, 1939. Cases of pyrexia occurring amongst parturient women belonging to the district are not necessarily notified locally. Women who develop puerperal pyrexia whilst in hospital outside the town are notified to the Medical Officer of Health of the district where the hospital or nursing home is situate.

Pneumonia—The incidence of 'notifiable' pneumonia was light as compared with 1943. There were twelve cases notified as compared with twenty-five in the previous year. This disease was certified as the primary cause of death in seven cases.

Erysipelas—Three cases were notified. There were no deaths ascribed to this disease.

Measles—The year 1944 was not a measles year but fifteen cases were notified. The infection occurred in five parishes. Nine of the cases were notified in the Parish of Passenham. The disease was of mild type and no deaths occurred.

Pertussis (Whooping Cough)—A total of forty-four cases were notified. Eleven parishes were affected but in no case did the number of cases exceed ten. There were no deaths and the disease was of a mild type.

Closure of Schools—No action was considered necessary under Article 57, of the Elementary Educational Provisional Code, 1922.

Tuberculosis—There were nine new cases of tuberculosis notified as compared with fourteen in 1943. Six cases had pulmonary manifestations (six males, three females), and three (one male, two females), had non-pulmonary lesions. Two males and one female died of pulmonary tuberculosis during the year. The age and sex incidence of new cases, and deaths from the disease are given in Table No. 11, page 32.

The number of deaths during the quinquennium 1940-44, together with mortality rates for the Administrative County and the district are as follows :

<i>Year</i>	<i>Tuberculosis—all forms</i>			<i>Rate per 1,000 of population</i>	
	<i>Male</i>	<i>Female</i>	<i>Total</i>	<i>Towcester</i>	<i>County</i>
1940	3	4	7	0.52	0.58
1941	2	2	4	0.27	0.50
1942	2	—	2	0.14	0.49
1943	3	1	4	0.28	0.50
1944	2	1	3	0.21	0.62

No action was considered necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under Section 172 of the Public Health Act, 1936.

Full statistical details showing age, monthly and parish incidence for infectious diseases are shown in Tables Nos. 8-12, pages 30-32.

SECTION G.

STATISTICAL TABLES, 1944.

TABLE No. 1.

CAUSES OF DEATH, 1944.

<i>Causes of Death</i>					<i>Male</i>	<i>Female</i>	<i>Total</i>
1.	Typhoid and paratyphoid fevers	...	...	...	—	—	—
2.	Cerebro-spinal fever	...	...	...	—	—	—
3.	Scarlet Fever	...	...	...	—	—	—
4.	Whooping cough	...	...	...	—	—	—
5.	Diphtheria	...	...	...	—	—	—
6.	Tuberculosis of respiratory system	...	...	...	2	1	3
7.	Other forms of tuberculosis	...	...	...	—	—	—
8.	Syphilitic diseases	...	...	...	—	—	—
9.	Influenza	...	...	...	1	—	1
10.	Measles	...	...	...	—	—	—
11.	Acute polio-myelitis and polio-encephalitis	...	...	...	—	—	—
12.	Acute infective encephalitis	...	...	...	—	—	—
13.	Cancer of buccal cavity and oesophagus (M) ; uterus (F)	...	...	...	1	1	2
14.	Cancer of stomach and duodenum	...	...	...	2	1	3
15.	Cancer of breast	...	...	...	—	3	3
16.	Cancer of all other sites	...	...	...	9	8	17
17.	Diabetes	...	...	...	1	1	2
18.	Intra-cranial vascular lesions	...	...	...	6	9	15
19.	Heart disease	...	...	...	31	37	68
20.	Other diseases of circulatory system	...	...	...	3	3	6
21.	Bronchitis	...	...	...	7	4	11
22.	Pneumonia	...	...	...	3	4	7
23.	Other respiratory diseases	...	...	...	3	1	4
24.	Ulcer of stomach or duodenum	...	...	...	1	—	1
25.	Diarrhoea under 2 years	...	...	...	—	—	—
26.	Appendicitis	...	...	...	—	—	—
27.	Other digestive diseases	...	...	...	1	1	2
28.	Nephritis	...	...	...	3	3	6
29.	Puerperal and post-abortive sepsis	...	...	...	—	—	—
30.	Other maternal causes	...	...	...	—	1	1
31.	Premature birth	...	...	...	2	—	2
32.	Congenital malformations, birth injury and infantile diseases	...	...	...	3	3	6
33.	Suicide	...	...	...	1	—	1
34.	Road traffic accidents	...	...	...	1	—	1
35.	Other violent causes	...	...	...	2	2	4
36.	All other causes	...	...	...	13	13	26
ALL CAUSES					96	96	192

TABLE No. 2.

CAUSES OF DEATH OF CHILDREN UNDER ONE YEAR, 1944.

<i>Causes of Death</i>	<i>Age in weeks</i>					<i>Total</i>
	—1	—2	—3	—4	5-52	
I. Congenital malformations ...	—	—	—	—	—	—
II. Diseases of early infancy						
Congenital debility and icterus ...	—	—	—	—	—	—
Premature birth ...	2	1	—	1	—	4
Injury at birth ...	1	—	—	—	—	1
Atelectasis ...	—	—	—	—	—	—
Others ...	—	—	—	—	—	—
III. Diseases of Respiratory system ...	—	—	—	—	1	1
IV. Diseases of Digestive system	—	—	—	—	—	—
V. Diseases of Nervous system	—	—	—	—	—	—
VI. Tuberculous diseases ...	—	—	—	—	—	—
VII. Infectious diseases ...	—	—	—	—	—	—
VIII. Syphilis ...	—	—	—	—	—	—
IX. Overlaying ...	—	—	—	—	—	—
X. Other violence ...	—	—	—	—	—	—
XI. All other causes ...	—	1	—	—	1	2
TOTALS ...	3	2	—	1	2	8

TABLE No. 3.

VITAL STATISTICS FOR 1944 AND PREVIOUS YEARS.

Year	Estimated Population	Births		Deaths			
				Under 1 year		All Ages	
		No.	Rate	No.	Rate	No.	Rate
*1911	10,484	—	—	—	—	—	—
1919	†9,387 ‡9,011	156	16.61	7	44.87	158	17.53
1920	9,370	259	27.64	15	57.90	146	15.58
*1921	9,920	211	21.27	21	99.52	131	13.20
1922	9,937	172	17.30	9	52.32	136	13.68
1923	9,944	171	17.19	9	52.63	120	12.06
1924	10,000	162	16.20	9	55.50	115	11.50
1925	9,959	150	15.06	8	53.33	123	12.35
1926	9,870	152	15.40	5	32.89	116	11.75
1927	9,887	144	14.56	8	55.55	115	11.63
1928	9,502	134	14.10	4	29.85	120	12.63
1929	9,398	139	14.79	6	43.16	138	14.68
1930	9,384	115	12.25	8	69.56	129	13.74
*1931	9,324	131	14.04	7	53.43	104	11.11
1932	9,324	118	12.65	0	00.00	114	12.22
1933	9,271	147	15.85	4	27.21	96	10.35
1934	9,200	114	12.39	5	43.80	132	14.34
1935	x13,155	180	13.67	7	38.88	181	13.75
1936	13,040	210	16.10	10	47.60	165	12.60
1937	12,900	170	13.20	9	52.90	197	15.30
1938	12,860	152	11.80	4	26.30	182	14.20
1939	†12,930 ‡13,020	184	14.20	5	27.11	170	13.06
1940	13,290	184	13.90	7	36.95	219	16.55
1941	14,750	203	13.80	14	68.96	211	14.31
1942	14,050	244	17.40	12	49.18	147	10.47
1943	13,690	254	18.55	14	55.11	193	14.23
1944	13,680	242	17.67	8	33.01	192	14.04

† Population for calculation of Birth-rates.

‡ Population for calculation of Death Rates.

x Potterspury R.D. added to district.

* Census years.

TABLE No. 4.

SUMMARY OF SANITARY INSPECTIONS, ETC., 1944.

No. of visits and inspections	...	...	...	...	...	3,225
Canal Boats inspected	...	...	...	...	...	2
Canal Boats, defects found and remedied	...	...	...	...	...	1
Slaughterhouses licensed	...	...	...	...	...	4
Slaughterhouses on register	...	...	...	...	...	23
Visits to slaughterhouses	...	...	...	...	...	152
Visits to butchers' shops	...	...	...	...	...	61
No. of Meat hawkers' vans inspected	...	...	...	...	...	12
No. of Fish hawkers' vans inspected	...	...	...	...	...	5
No. of Fruit hawkers' vans inspected	...	...	...	...	...	5
No. of Fried Fish hawkers' vans inspected	...	...	...	...	...	4
Provision vans inspected	...	...	...	...	...	9
Bakehouses inspected	...	...	...	...	...	6
Privies converted to pail closets	...	...	...	...	...	3
Pails to water closets	...	...	...	...	...	2
Caravans inspected	...	...	...	...	...	25
Cowsheds on register	...	...	...	...	...	212
Cowsheds inspected	...	...	...	...	...	131
Cowsheds, defects found and remedied	...	...	...	...	...	12
Cowsheds reconstructed and reconditioned	...	...	...	...	...	5
Outfall works cleaned out	...	...	...	...	...	25
Settling tanks cleaned out	...	...	...	...	...	17
Cesspools cleaned out	...	...	...	...	...	10
Rooms disinfected	...	...	...	...	...	34
Articles of clothing and bedding disinfected	...	...	...	...	...	814
Drains tested by water test	...	...	...	...	...	5
Drains tested by smoke test	...	...	...	...	...	34
Drains reconstructed to houses after defects found	...	...	...	...	...	1
Nuisances from untrapped drains	...	...	...	...	...	10
Nuisances from blocked drains	...	...	...	...	...	78
Nuisances from defects in houses	...	...	...	...	...	63
Nuisances from offensive ditches	...	...	...	...	...	19
No. of new Houses erected by private enterprise	...	...	...	...	...	<i>nil.</i>
No. of new Houses erected by Council	...	...	...	...	...	<i>nil.</i>
Notices served :						
Informal under S.92, Public Health Act, 1936	...	...	...	...	...	6
Statutory under S.92 of Public Health Act, 1936	...	...	...	...	...	5

TABLE No. 5.

HOUSING.

1. Inspection of Dwelling-houses during the year—

1.	(a)	Number of dwelling-houses inspected for defects (under Public Health or Housing Acts)	...	...	...	...	67
	(b)	Inspections made for the purpose	...	...	...	...	103
2.	(a)	Number of dwelling-houses inspected and recorded under Housing Consolidated Reg. 1925/32	...	...	...	...	1
	(b)	Inspections made for the purpose	...	...	...	...	1
3.		Number of dwelling-houses found to be in a state dangerous or injurious to health as to be unfit for human habitation	...				4
4.		Dwelling-houses (exclusive of those under preceding sub-head) not in all respects reasonably fit for habitation	...	...			63

2. Remedy of Defects during the year without Service of Formal Notice—

Number of houses rendered fit in consequence of action by Local Authority or Officers :

Housing Act	...	...	...	...	...	...	<i>nil.</i>
Public Health Act	...	...	...	...	...	...	63

3. Action under Statutory Powers during the year—

A. *Proceedings under Sections 9, 10 and 16 Housing Act, 1936.*

1.	Dwelling-houses in respect of which notices were served requiring repairs	...	...	...	...	...	<i>nil.</i>
2.	Dwelling-houses rendered fit after service of formal notice.						
	(a) By owners	...	...	...	...	...	<i>nil.</i>
	(b) By Local Authority in default of owners	...	...	...	...	...	<i>nil.</i>

B. *Proceedings under Public Health Acts.*

1.	Dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	...	7
2.	Dwelling-houses in which defects were remedied after service of formal notices—						
	(a) By owners	...	...	...	...	...	5
	(b) By Local Authority in default of owners	...	...	...	...	...	<i>nil.</i>

C. *Proceedings under Sections 11 and 13 of the Housing Act, 1936.*

1.	Dwelling-houses in respect of demolition Order	...	...	...	...	1
2.	Dwelling-houses demolished	...	...	...	...	<i>nil.</i>

D. *Proceedings under Section 12 of the Housing Act, 1936.*

1.	Separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	...	<i>nil.</i>
2.	Number of separate tenements or underground rooms in respect of which Closing Orders were determined	...	...	...	...	<i>nil.</i>

4. Housing Act, 1936—Part 4—Overcrowding—

Present position unknown.

TABLE NO. 6.

SAMPLES OF MILK TAKEN FOR BACTERIOLOGICAL TESTS OF
CLEANLINESS AND KEEPING QUALITIES, 1944.

<i>Month</i>		<i>No.</i>	<i>Good</i>	<i>Moderate</i>	<i>Bad</i>
January	...	6	3	2	1
February	...	6	6	—	—
March	... ..	7	7	—	—
April	... ..	7	6	1	—
May	... ..	2	2	—	—
June	... ..	6	5	1	—
July	... ..	6	4	2	—
August	... ..	4	1	1	2
September	...	7	—	4	3
October	... ..	6	4	1	1
November	...	6	5	1	—
December	...	5	4	1	—
TOTALS	...	68	47	14	7

TABLE NO. 7.

FOOD SURRENDERED AND DESTROYED.

		<i>Tins</i>			
Tinned Milk	.....	131			
Tinned Fish	.....	17			
Tinned Vegetables	.....	86			
Tinned Soup	.....	5			
Tinned Jam	.....	9			
Tinned Syrup	.....	6			
		<i>Tons</i>	<i>cwts.</i>	<i>qrs.</i>	<i>lbs.</i>
Tinned Meat	.....	—	1	2	3 $\frac{3}{4}$
Meat	.....	1	1	1	6
Bacon	.....	—	—	1	22 $\frac{1}{2}$
Dried Fruit	.....	—	—	—	4
Cheese	.....	—	—	—	13
Cereals	.....	—	—	—	12
Oranges	.....	—	2	2	—

TABLE No. 8.

AGE INCIDENCE OF NOTIFIABLE DISEASES
(Other than Tuberculosis) 1944.

<i>Disease</i>	—1	—2	—3	—4	—5	—10	—15	—20	—35	—45	—65	65+	<i>All Ages</i>	<i>Removed to Hospital</i>	<i>Deaths</i>
Scarlet Fever ...	—	1	1	1	2	14	4	2	1	1	—	—	27	10	—
Pneumonia ...	—	—	2	—	—	2	1	1	1	2	1	2	12	—	7
Erysipelas ...	—	—	—	—	—	—	—	—	—	—	2	1	3	—	—
Measles ...	—	1	2	1	1	8	2	—	—	—	—	—	15	—	—
Whooping cough	4	6	4	5	5	19	—	—	—	1	—	—	44	—	—
Totals ...	4	8	9	7	8	43	7	3	2	4	3	3	101	10	7

TABLE No. 9.

MONTHLY INCIDENCE OF NOTIFIABLE DISEASES
(Other than Tuberculosis) 1944.

<i>Disease</i>	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTALS
Scarlet Fever ...	4	1	3	2	4	2	1	—	2	4	1	3	27
Pneumonia ...	2	5	2	—	1	1	—	—	1	—	—	—	12
Erysipelas ...	—	1	—	—	—	—	1	—	1	—	—	—	3
Measles ...	—	—	—	1	1	1	1	—	—	—	—	11	15
Whooping cough	3	2	6	3	2	10	5	6	4	—	3	—	44
Totals ...	9	9	11	6	8	14	8	6	8	4	4	14	101

TABLE No. 10.

INCIDENCE OF NOTIFIABLE DISEASES
(other than Tuberculosis)
IN INDIVIDUAL PARISHES, 1944

<i>Parish</i>	<i>Scarlet Fever</i>	<i>Pneumonia</i>	<i>Erysipelas</i>	<i>Measles</i>	<i>Whooping Cough</i>	<i>Total</i>
Abthorpe ...	1	—	—	—	—	1
Blakesley ...	—	—	—	—	3	3
Cold Higham ...	—	—	—	—	2	2
Cosgrove ...	—	3	—	—	—	3
Gayton ...	—	1	—	—	—	1
Greens Norton ...	5	—	—	—	5	10
Litchborough ...	—	—	—	—	7	7
Passenham ...	2	2	1	9	2	16
Paulerspury ...	1	—	—	1	—	2
Potterspury ...	5	4	—	2	1	12
Shutlanger ...	—	—	—	—	2	2
Silverstone ...	4	—	—	1	—	5
Tiffield ...	1	—	—	—	—	1
Towcester ...	3	1	1	2	10	17
Wappenham ...	1	—	—	—	—	1
Weston & Weedon	—	—	—	—	3	3
Whittlebury ...	2	—	—	—	6	8
Yardley Gobion	2	1	1	—	3	7
Totals ...	27	12	3	15	44	101

TABLE NO. 11.

NEW CASES OF AND DEATHS FROM TUBERCULOSIS, 1944.

Age Periods	NEW CASES				DEATHS			
	Respiratory		Non-respiratory		Respiratory		Non-respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female
— 1	—	—	—	—	—	—	—	—
— 5	—	—	—	1	—	—	—	—
—15	—	—	—	—	—	—	—	—
—25	3	1	—	1	1	—	—	—
—35	1	—	—	—	—	—	—	—
—45	—	—	1	—	1	—	—	—
—55	—	—	—	—	—	—	—	—
—65	1	1	—	—	—	—	—	—
65+	—	—	—	—	—	1	—	—
Totals	5	1	1	2	2	1	—	—

TABLE NO. 12.

BIRTH RATES, CIVILIAN DEATH RATES, ANALYSIS OF MORTALITY AND
CASES RATES FOR CERTAIN INFECTIOUS DISEASES FOR TOWCESTER
RURAL DISTRICT AND ENGLAND AND WALES, 1944.

					England and Wales	Towcester
Live Births	...	...	...	...	17.60	17.67
Stillbirths	...	...	...	...	0.50	0.57
Deaths—						
All Causes	...	...	...	...	11.60	14.04
Typhoid	...	...	...	...	0.00	0.00
Scarlet Fever	...	...	...	...	0.00	0.00
Whooping Cough	...	...	...	...	0.03	0.00
Diphtheria	...	...	...	...	0.02	0.00
Influenza	...	...	...	...	0.12	0.00
Measles	...	...	...	...	0.01	0.00
Deaths under one year	...	...	...	...	46.00	33.01
Notifications—						
Typhoid	...	...	...	...	0.01	0.00
Cerebro-spinal fever	...	...	...	...	0.05	0.00
Scarlet Fever	...	...	...	...	2.40	1.97
Whooping Cough	...	...	...	...	2.49	3.26
Diphtheria	...	...	...	...	0.58	0.00
Erysipelas	...	...	...	...	0.29	0.21
Measles	...	...	...	...	4.16	1.09
Pneumonia	...	...	...	...	0.97	0.86

